

6000
9624

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | W | | 08/24/01 |
| O.I.P.E. CLASSIFIER | | W | 8/31/01 |
| FORMALITY REVIEW | BE | 897 | 09-21-01 |
| RESPONSE FORMALITY REVIEW | MJ | JAR | 03/12/02 |
| | PL | 1076 | |

INDEX OF CLAIMS

- ✓ Rejected
= Allowed
- (Through numeral)... Canceled
+ Restricted
- N Non-elected
I Interference
A Appeal
O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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| Claim | Date |
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50-781
03-12-01

586
01-21-01

If more than 150 claims or 10 actions
staple additional sheet here

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